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CONFIRMATION NO. 8892

SERIAL NUMBER 09/988,805	FILING OR 371(c) DATE 11/20/2001 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 1194-199								
APPLICANTS Peter Geistlich, Stansstad, SWITZERLAND; Lothar Schloesser, Darmstadt, GERMANY; ** CONTINUING DATA ** This application is a CIP of 09/986,757 11/09/2001 PAT 6,676,969 which is a CON of 08/894,517 11/10/1997 PAT 6,236,029 ** FOREIGN APPLICATIONS ***** UNITED KINGDOM 9503492.2 02/22/1995 IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 11/30/2001 Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Shennedy</u> Examiner's Signature Initials ADDRESS 6449 TITLE Resorbable extracellular matrix for reconstruction of cartilage <table border="1"> <tr> <td rowspan="6">FILING FEE RECEIVED 435</td> <td rowspan="6"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>					FILING FEE RECEIVED 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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